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Fill in this information to identify yo	our case:	
United States Bankruptcy Court fo	r the:	
Central District of C	<u>alifornia</u>	
Case number (If known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is amended filing

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Taurean	
	Write the name that is on your	First name	First name
	government-issued picture identification (for example, your	E Middle name	
	driver's license or passport).		Middle name
	Bring your picture identification to your meeting with the trustee.	Wright Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
	All other names you have		
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and <i>doing business as</i>	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any separate legal entity such as a		
	corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>1</u> <u>6</u> <u>9</u> <u>9</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	otor 1	Taurean	E	Wright		Case number	(if known)
		First Name	Middle Name	Last Name	_		
			About Debtor 1	1:		About Debtor 2 (Spou	use Only in a Joint Case):
4.	Your Emplo	oyer Identification					
	Number (El		EIN -	. – – – – –	•		
			 EIN	. — — — — —	-	 EIN	
5.	Where you	live				If Debtor 2 lives at a d	lifferent address:
			107 Cachani	illa Ct			
			Number S	treet		Number Street	
			Palm Desert	:, CA 92260-3159			
			City	State ZIF	Code	City	State ZIP Code
			Riverside				
			County			County	
				address is different from the ote that the court will send any ing address.			address is different from yours, fill e court will send any notices to you s.
			Number S	treet		Number Street	
			P.O. Box			P.O. Box	
			City	State ZIF	P Code	City	State ZIP Code
6.		re choosing <i>this</i>	Check one:			Check one:	
	district to f	ile for bankruptcy	Over the la have lived district.	ast 180 days before filing this print this district longer than in an	etition, I y other		days before filing this petition, I district longer than in any other
				ther reason. Explain. S.C. § 1408)		I have another rea (See 28 U.S.C. §	

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Debt	tor 1	Taurean	E	Wright	_ Case nur	nber (if known)
		First Name	Middle Nam	e Last Name	_	
Par	t 2: Tell the	Court About You	ur Bankru	ptcy Case		
7.	The chapter	of the Bankruptcy e choosing to file	Check one Bankrupto Cha Cha	e. (For a brief description of each, see <i>Notice</i> by (Form 2010)). Also, go to the top of page 1 pter 7 pter 11 pter 12 pter 13		
8.	How you wil	pay the fee	details check a crec to Paj	pay the entire fee when I file my petition. Ples about how you may pay. Typically, if you are, or money order. If your attorney is submitting the card or check with a pre-printed address.  It to pay the fee in installments. If you choose the Filing Fee in Installments (Official Form est that my fee be waived (You may request may, but is not required to, waive your fee, at poverty line that applies to your family size the this option, you must fill out the Application and file it with your petition.	e paying the fee yourse ag your payment on you e this option, sign and an 103A).  It this option only if you a and may do so only if you and you are unable to p	If, you may pay with cash, cashier's in behalf, your attorney may pay with attach the Application for Individuals are filing for Chapter 7. By law, a jur income is less than 150% of the pay the fee in installments). If you
9.	Have you file within the las	ed for bankruptcy st 8 years?	[		When 12/04/2024 MM / DD / YYYY When MM / DD / YYYY When MM / DD / YYYY	Case number 6:24-bk-17273-SY  Case number  Case number
10.	pending or b spouse who case with yo	kruptcy cases eing filed by a is not filing this u, or by a ther, or by an		Debtor Whe	en	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent	your residence?	_	Go to line 12.  Has your landlord obtained an eviction judgn  No. Go to line 12.  Yes. Fill out <i>Initial Statement About an E</i> as part of this bankruptcy petition.		est You (Form 101A) and file it

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Deb	tor 1 Taurean	E	Wright		Case number (if known)
	First Name	Middle Name	e Last Name		, ,
Par	t 3: Report About Any Busin	esses You	ı Own as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	No. Go	o to Part 4. ame and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	Name o	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	City			7ID Oods
		City		State	ZIP Code
		_	the appropriate box to describe your but		
		_	ealth Care Business (as defined in 11 U.S	• (	"
		<b>∟</b> Sii	ngle Asset Real Estate (as defined in 11	U.S.C. § 101(	51B))
		☐ St	ockbroker (as defined in 11 U.S.C. § 101	(53A))	
			ommodity Broker (as defined in 11 U.S.C	. § 101(6))	
		☐ No	one of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?	appropriate sheet, state	e deadlines. If you indicate that you are a	a small busines nt, and federal i	ou are a small business debtor so that it can set is debtor, you must attach your most recent balance income tax return or if any of these documents do not
	For a definition of small business	☑ No.	I am not filing under Chapter 11.		
	debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter 11, but I am I Bankruptcy Code.	NOT a small b	usiness debtor according to the definition in the
		☐ Yes.	I am filing under Chapter 11, I am a sm Bankruptcy Code, and I do not choose		
		☐ Yes.	I am filing under Chapter 11, I am a sm		

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Deb	tor 1	Taurean	E	Wright	Case number (if known)
		First Name	Middle Nan	ne Last Name	<del></del>
Par	t 4: Report	t if You Own or H	ave Any ⊢	lazardous Property or	Any Property That Needs Immediate Attention
14.	Do you owr	n or have any	☑ No.		
	alleged to p	at poses or is ose a threat of	☐ Yes.	What is the hazard?	
	hazard to p	nd identifiable ublic health or			
		do you own any at needs immediate		If immediate attention is r	needed, why is it needed?
		e, do you own loods, or livestock			
	that must be	e fed, or a building urgent repairs?			
				Where is the property?	
					Number Street

City

State

ZIP Code

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Debtor 1	Taurean	E	Wright	Case number (if known)
	First Name	Middle Name	Last Name	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

reasonably tried to do so.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debt	tor 1	Taurean	E	Wright		Case	number	(if known)
		First Name	Middle N	Name Last Name				
	79							
Par	t 6: Answ	er These Question	s for R	eporting Purposes				
16.	What kind have?	of debts do you	16a.			ner debts? Consumer debts are o v for a personal, family, or househ		
			16b.			ss debts? Business debts are det rough the operation of the busine		
			16c.	State the type of debts you ow	ve th	nat are not consumer debts or bus	siness c	lebts.
				-				<u>.</u>
17.	Are you fili	ng under Chapter 7?		No. I am not filing under Cha	aptei	7. Go to line 18.		
	exempt pro and admini paid that fu	imate that after any operty is excluded strative expenses an unds will be available tion to unsecured				Do you estimate that after any expand that funds will be available		
18.		creditors do you at you owe?		1-49	0	☐ 25,001-50,000 ☐ 50,00	00-100,(	000
19.	How much assets to b	do you estimate you e worth?	r 🗆	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much liabilities to	do you estimate you be?	r 000 <b>%</b>	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	0000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	0000	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Par	t 7: Sign E	Below						
For	ryou	If I have States C If no atto have obi I reques I unders bankrup and 357	chosen code. I un priney reparained and trelief in tand matery case	to file under Chapter 7, I am aw nderstand the relief available un presents me and I did not pay o nd read the notice required by a n accordance with the chapter o king a false statement, conceal	vare nder or ag 11 U of title	each chapter, and I choose to progress to progress to pay someone who is not a .S.C. § 342(b).  e 11, United States Code, specific property, or obtaining money or p	nder Charoceed ( n attorn ed in thi	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition.

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Debtor 1	Taurean	E	Wright	Case number (if known)
	First Name	Middle Name	Last Name	
For your at	torney, if you are d by one	proceed under	Chapter 7, 11, 12, or 13 of	his petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by
	ot represented by an ou do not need to file this	11 U.S.C. § 34	2(b) and, in a case in which	is \$ 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/Benja	min Heston	Date <b>03/25/2025</b>
		•	of Attorney for Debtor	MM / DD / YYYY
		Beniami	n Heston	
		Printed na		
		Nexus B	Bankruptcy	
		Firm name	;	
		3090 Bri	stol Street #400	
		Number	Street	
		Costa M	esa	CA 92626
		City		State ZIP Code
		Contact ph	none <u>(949) 312-1377</u>	Email address ben@nexusbk.com
		297798		CA
		Bar numbe	er	State

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Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
Benjamin Heston	
Bar Number: 297798	
Nexus Bankruptcy	
3090 Bristol Street #400 Costa Mesa, CA 92626	
Phone: (949) 312-1377	
Email: ben@nexusbk.com	
Debtor(s) appearing without attorney	
✓ Attorney for Debtor(s)	
UNITED STATES BA	NKRUPTCY COURT
CENTRAL DISTRICT OF CA	ALIFORNIA - RIVERSIDE DIVISION
In re:	CASE NO.:
Taurean E Wright	CHAPTER: 13
Taurean E Wilght	
	VERIFICATION OF MASTER
	MAILING LIST OF CREDITORS
	NOW SHIPPING SCHOOLSON TOTAL SOCI
	[LBR 1007-1(a)]
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applications are considered as a second control of the Debtor's attorney at the Debtor's attorney if applications are considered as a second control of the Debtor's attorney at the Debtor's attorney atto	
creditors filed in this bankruptcy case, consisting of 3 sheet(s) is	
A CONTRACTOR OF THE CONTRACTOR	complete, correct, and consistent with the Debtor's schedules and I/we
assume all responsibility for errors and omissions.	complete, correct, and consistent with the Debtor's schedules and I/we
assume all responsibility for errors and omissions.  —	complete, correct, and consistent with the Debtor's schedules and I/we
	complete, correct, and consistent with the Debtor's schedules and I/we
Date: 03/25/2025	complete, correct, and consistent with the Debtor's schedules and I/we
Date: 03/25/2025	J. FulA
Date: 03/25/2025  Sign	ature of Debtor
Date: 03/25/2025  Sign	J. FulA
Date: 03/25/2025  Date:	ature of Debtor
Date: 03/25/2025  Date: Sign  Date:	ature of Debtor

AI DVANTAGE / DEPARTMENT OF EDUCATION PO BOX 300001 GREENVILLE, TX 75403-3001

BEST EGG PO BOX 42912 PHILADELPHIA, PA 19101-2912

CAPITAL ONE PO BOX 31293 SALT LAKE CITY, UT 84131-0293

CAPITAL ONE AUTO FINANCE PO BOX 60511 CITY INDUSTRY, CA 91716-0511

CHERRY TECHNOLOGY 2261 MARKET ST PMB 4869 SAN FRANCISCO, CA 94114-1612

CITIBANK / MACYS PO BOX 6789 SIOUX FALLS, SD 57117-6789

COMENITY CAPITAL / BIG O TIRES PO BOX 183003 COLUMBUS, OH 43218-3003

COMENITY CAPITAL / SAKS 5TH AVE PO BOX 183003 COLUMBUS, OH 43218-3003 COMENITY CAPITAL / VICTORIAS SECRET PO BOX 182273 COLUMBUS, OH 43218-2273

EMPLOYMENT DEVELOPMENT DEPT. BANKRUPTCY GROUP MIC 92E PO BOX 826880 SACRAMENTO, CA 94280-0001

FRANCHI SE TAX BOARD PERSONAL BANKRUPTCY MS A340 PO BOX 2952 SACRAMENTO, CA 95812-2952

I C SYSTEM 444 HIGHWAY 96 E SAINT PAUL, MN 55127-2557

INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY OPERATION PO BOX 7346 PHILADELPHIA, PA 19101-7346

PHH MORTGAGE PO BOX 371458 PITTSBURGH, PA 15250-7458

SUNPOWER PO BOX 91910 SIOUX FALLS, SD 57109-1910

SYNCHRONY / TJX PO BOX 71737 PHILADELPHIA, PA 19176-1737 SYNCHRONY / VENMO PO BOX 71737 PHILADELPHIA, PA 19176-1737

TD BANK / NORDSTROM PO BOX 6555 ENGLEWOOD, CO 80155-6555